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FORM D

PROCESSED
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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	je burden
hours per respon	se16.00

SEC USE ONLY						
Prefix	Serial					
DAT	E RECEIVED					
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):	D V ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	07083542
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Sadie Katz Deli, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
207 College Street, Burlington, Vermont 05401	802-658-0889
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
189 Bank Street, Burlington, Vermont 05401	802-864-5308
Brief Description of Business	1.4
Restaurant/deli	HEG. IVED
Type of Business Organization Corporation limited partnership, already formed other (business trust limited partnership, to be formed	please specify): (UIV) . (UU/
Month Year Actual or Estimated Date of Incorporation or Organization: 110 017 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTI	0	N
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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information re	equested for the fo	llowing:			
 Each promoter of t 	the issuer, if the is	suer has been organized w	ithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	f a class of equity securities of the issuer.
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
 Each general and r 	nanaging <mark>partne</mark> r o	f partnership issuers.			
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre 207 College Street, Burlin			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i John Beeman	f individual)				
Business or Residence Addre 425 Snipe Ireland Road, F		•	ode)	-	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Scott and Lisa Steinmetz		he entirety			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		·
8606 Northfield Circle, Lui	therville, Maryla	nd 21093 (acquired the	eir shares in this offerin	ng)	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f indivídual)				
Business or Residence Address	ss (Number and	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	(individual)				
Business or Residence Address	s (Number and	Street, City, State, Zip Co-	de)	<u></u>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			_	
Business or Residence Addres	s (Number and S	Street, City, State, Zip Coo	dc)		

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The shall be described as the immediate and the same and the discussion in this official 2							Yes	No				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							X					
2. What is the minimum investment that will be accepted from any individual?							s 50,0	00.00				
	2. what is the infilling investment that will be accepted from any individual?								Yes	No		
		permit join									×	
commis If a pers or state	ssion or sim son to be lis s, list the na	tion reques silar remune sted is an as ame of the b , you may s	eration for s sociated pe proker or de	solicitation rson or age aler. If me	of purchase int of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering. with a state		
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	Address ()	Number and	l Street, C	itv. State. 7	in Code)						
		(-			,, -							
Name of As	sociated B	roker or De	aler									
States in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)			*****************		***************************************		☐ All	States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name (Last name	first, if ind	ividual)		•			·				
Business or	Residence	Address (Number an	d Street, C	ity, State, 2	Zip Code)						
Name of As	sociated B	roker or De	aler	<u>-</u>								
States in W	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	•					· · · · · · · · · · · · · · · · · · ·
(Check	"All State:	s" or check	individual	States)	•••••			••••••				States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HL	ĪĎ
IL	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE SC	NV	NH	NJ	NM TTT	NY	NC VA	ND WA	OH	OK	OR OV	PA
RI	SC	[SD]	TN	TX	UT	VT	VA	WA	WV	[WI]	WY]	PR]
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	: Address (Number an	d Street, C	ity, State, 2	Zip Code)						
Name of As	sociated B	roker or De	aler					-				
States in Wi	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers											
(Check "All States" or check individual States)						☐ All	States					
AL IL MT RY	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security 50,000.00 Common Preferred Partnership Interests ________\$______ **......** \$ 50,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors \$ 50,000:00 Non-accredited Investors 1 \$ 50,000.00 Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ 0.00 Printing and Engraving Costs 795.00 Legal Fees \$ \$ 0.00 Accounting Fees 0.00 Engineering Fees

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify) State of Maryland - Filing Fee

Total

§ 0.00

400.00

1,195.00

	C. OFFERING PRICE NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Queroceeds to the issuer."	question 4.a. This difference is the "adjusted gross		48,805.00 \$
	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part (purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$. 🗀 \$
	Purchase of real estate	[] \$ _	<u> </u>
	Purchase, rental or leasing and installation of mach	inery [
	Construction or leasing of plant buildings and facili	ities[] \$ _	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets ssuer pursuant to a merger)	s or securities of another	¬s	□\$
	Repayment of indebtedness	_	_	_
	Working capital			_
	Other (specify): Working capital reserve to be he	ld in a suspense account during the period	ם	48,805.00
	when the issuer has outstanding indebtedness to	Merchants Bank and U.S. Small Business	J -	
	Administration under the terms of a certain loan a	ngreement] s	
	Column Totals		<u>s_0.00</u>	<u>\$ 48,805.00</u>
	Total Payments Listed (column totals added)		□ \$ <u>4</u>	3,805.00
3	第11 本 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	D. FEDERAL SIGNATURE	. (B)	
igna	ssuer has duly caused this notice to be signed by the u ture constitutes an undertaking by the issuer to furni formation furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis-	sion, upon writte	le 505, the following request of its sta
ssue	r (Print or Type)	Signature)	Date	
Sad	e Katz Deli, Inc.	Y	November 5, 20	07
		Title of Signer (Print or Type)	•	
3leni	R. Walter	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)